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4	E-filing
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7	Cn.
8	UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA
9	} MV 00 1005
11	Plaintiff, { CV 08 1995
12	vs. PRISONER'S
13	APPLICATION TO PROCEED IN FORMA PAUPERIS
14	Defendant.
15	)
16	1, Timoteo Comez, declare, under penalty of perjury that I am the
17	plaintiff in the above entitled case and that the information I offer throughout this application
18	is true and correct. I offer this application in support of my request to proceed without being
19	required to prepay the full amount of fees, costs or give security. I state that because of my
20	poverty I am unable to pay the costs of this action or give security, and that I believe that I am
21	entitled to relief.
22	In support of this application, I provide the following information:
23	1. Are you presently employed? Yes No
24	If your answer is "yes," state both your gross and net salary or wages per month, and give the
25	name and address of your employer:
26	Gross: Net:
27	Employer:
28	

1	If the answer is "no," state the date of last employment and the amount of the gross and net							
2	salary and wages per month which you received. (If you are imprisoned, specify the last							
3	place of employment prior to imprisonment.)							
4								
5								
6								
7	2. Н	2. Have you received, within the past twelve (12) months, any money from any of the						
8	following	g sour	ces:	$\sim$				
9	a.	•	Business, Profession or	Yes No				
10			self employment					
11	Ъ.		lncome from stocks, bonds,	Yes No				
12			or royalties?	\ <u>\</u>				
13	c.	-	Rent payments?	Yes No				
14	d.		Pensions, annuities, or	Yes No				
15			life insurance payments?					
16	e.	•	Federal or State welfare payments,	Yes No				
17			Social Security or other govern-					
18			ment source?					
19	If the ans	swer is	s "yes" to any of the above, describe ea	ach source of money and state the amount				
20	received	from	each.					
21								
22								
23	3. A	re you	married?	Yes No				
24	Spouse's	Full 1	Vame:					
25	•		of Employment:					
26	Spouse's Monthly Salary, Wages or Income:							
27	Gross \$_		Net \$					
28	4. a.		List amount you contribute to your sp	oouse's support:\$				

1	b. List the persons other than your spouse who are dependent upon you for							
2	support and indicate how much you contribute toward their support. (NOTE:							
3	For minor children, list only their initials and ages. DO NOT INCLUDE							
4	THEIR NAMES.).							
5								
6								
7	5. Do you own or are you buying a home? Yes No							
8	Estimated Market Value: \$ Amount of Mortgage: \$							
9	6. Do you own an automobile? Yes No							
10	Make Year Model							
ù	ls it financed? Yes No If so, Total due: \$							
12	Monthly Payment: \$							
13	7. Do you have a bank account? Yes No Do not include account numbers.)							
14	Name(s) and address(es) of bank:							
15								
16	Present balance(s): \$  Do you own any cash? Yes No Amount: \$							
17	Do you own any cash? Yes No Amount: \$							
18	Do you have any other assets? (If "yes," provide a description of each asset and its estimated							
19	market value.) Yes No							
20								
21	8. What are your monthly expenses?							
22	Rent: \$ Utilities:							
23	Food: \$ Clothing:							
24	Charge Accounts:							
25	Name of Account Monthly Payment Total Owed on This Acct.							
26	ss							
27	\$\$\$							
28	\$\$\$							

APP. TO PROC. IN FORMA PAUPERIS

1	9. Do you have any other debts? (List current obligations, indicating amounts and to
2	whom they are payable. Do <u>not</u> include account numbers.)
3	
4	
5	10. Does the complaint which you are seeking to file raise claims that have been presented
6	in other lawsuits? Yes No
7	Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
8	which they were filed.
9	
10	
11	l consent to prison officials withdrawing from my trust account and paying to the court
12	the initial partial filing fee and all installment payments required by the court.
13	l declare under the penalty of perjury that the foregoing is true and correct and
14	understand that a false statement herein may result in the dismissal of my claims.
15	11 11-20
16	4-4-08 motes Gomes
17	DATE SIGNATURE OF APPLICANT
18	
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months
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risoner's

TS210B CALIFORNIA DEPARTMENT OF CORRECTIONS
ITAS TRUST ACCOUNT DISPLAY

----- ACCOUNT INFORMATION ------ SPECIAL ITEMS -----

ACCOUNT NUMBER: F01170

ACCOUNT NAME: GOMEZ, TIMOTEO

ACCOUNT TYPE: I

CURRENT BALANCE: 32.59
HOLD BALANCE: 0.00
ENCUM. BALANCE: 0.00
AVAILABLE: 32.59

PRIVILEGE GROUP: U

LAST CANTEEN: 04/17/2006

	<b>-</b> - <b>-</b>		ACCOUNT TRANSACT	IONS		TS210CA
DATE	TRAN	AMOUNT	DESCRIPTION	CHECK NUM	COMMENT	BALANCE
07/05/06	W536	0 52-	COPAY CHARGE		0026MEDCAL	0.00
02/20/07			CHECK DEPOSIT O		2939/R&R	1.02
05/10/07			CHECK DEPOSIT O		3837/R&R	8.76
07/09/07	DD34	27.00	EFT DEPOSIT ONL		0059/J-PAY	35.76
07/23/07		3.51-	RELEASES FROM C		0343V7-023	32.25
02/11/08	DD31	0.34	CHECK DEPOSIT O		3083/R&R	32.59
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